



NEW CUSTOMER FORM

Customer #: _____ Date Entered: _____

Sales Rep.: _____ Entered By: _____

Bill To Name: _____ Primary Ship To: _____

Address: _____

City, ST, ZIP: _____

Purch. Agent: _____ County: _____

P.A. Phone: _____ Receiving Contact: _____

P.A. Fax: _____ Receiving Hours: _____

A/P Contact: _____ Receiving Phone: _____

A/P Phone: _____

A/P Fax: _____

Special Instructions (Bundle Qty., Palletized, Unitized, max. pallet height, unloading-forklift, hand, etc.)

DIRECTIONS: _____

DELIVERY: BBP UPS Common Carrier _____ FOB: _____
 Pre-Paid Collect Pre-Paid and Add 3rd Party Bill: _____

Sales & Use Tax #: _____ Taxable ? _____

SIC Code: _____

Customer Service Representative: _____ Credit Requested: _____

Order Pending? _____ Fax Number to send Credit Application: _____

GENERAL COMMENTS: _____

(Ship-To Information Continued on Back of Form)

Ship To: _____

Receiving Contact: _____
Receiving Hours: _____
Receiving Phone: _____

County: _____
Purch. Agent: _____
P.A. Phone: _____
P.A. Fax: _____

| DIRECTIONS |
|------------|
| |

DELIVERY: BBP UPS Common Carrier _____ FOB: _____
 Pre-Paid Collect Pre-Paid and Add 3rd Party Bill: _____

Sales & Use Tax #: _____ Taxable ? _____

Special Instructions (Bundle Qty., Palletized, Unitized, max. pallet height, unloading-forklift, hand, etc.) _____

Ship To: _____

Receiving Contact: _____
Receiving Hours: _____
Receiving Phone: _____

County: _____
Purch. Agent: _____
P.A. Phone: _____
P.A. Fax: _____

| DIRECTIONS |
|------------|
| |

DELIVERY: BBP UPS Common Carrier _____ FOB: _____
 Pre-Paid Collect Pre-Paid and Add 3rd Party Bill: _____

Sales & Use Tax #: _____ Taxable ? _____

Special Instructions (Bundle Qty., Palletized, Unitized, max. pallet height, unloading-forklift, hand, etc.) _____

